



(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)		(12) AGENCY ACCOUNTING OFFICE USE ONLY	
Attended United We Serve Planning Meeting		(13) PRIVATE VEHICLE LICENSE NUMBER 4ybd289	
		(14) MILEAGE RATE CLAIMED .50	
		AGENCY ACCOUNTING OFFICE USE ONLY	
		PAID BY REVOLVING FUND CHECK NUMBER \$0.50	
THEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate. I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750 0751 0752 0753, and 0754 pertaining to vehicle safety and seat belt usage.			
(15) CLAIMANT'S SIGNATURE 	DATE 3/11/10	(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT 	DATE 3-11-10
(17) SPECIAL EXPENSE AUTHORIZATION - SIGNATURE and TITLE (See Item 17 of reverse)			DATE